PUBLIC HEALTH STATISTICS

STATE OF

OKLAHOMA 1950



PART I REPORTABLE DISEASES

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REPORTABLE DISEASES

Oklahoma State Health Department Oklahoma City, Oklahoma

G. F. MATHEWS, M. D., Commissioner

FOREWORD

Although no longer so dramatic, perhaps, as in the first decades following the discovery of the basic principles of epidemiology and the control of communicable diseases, the fight against these diseases is a continuing one. The purpose of this book is to provide those who are interested or professionally concerned in the control of disease with a report on the effectiveness of the measures now in use and, it is hoped, with leads toward more effective measures in the future.

A report of this kind is necessary because of the limited experience which any individual can have with the total disease problem. The physician with the most varied practice sees only a tiny proportion of the population of the State, while even the records of a large hospital can hardly be expected to provide a true cross-section of that population. Hence, it is necessary that data be collected for an entire state and, in cooperation with other states, for the Nation, in order to provide the forces of health with the numerical basis for their plans.

The deficiencies of such data, due to the probably large numbers of undiagnosed or unreported cases of certain diseases, are well known. The seeking of diagnosis and treatment is dependent on the patient and his family, and may perhaps be improved slowly by education. Nevertheless, the value of statistical reports to the research worker, the practicing physician and public health worker, and ultimately to the patient himself, can be enhanced at once by complete reporting of the cases which are diagnosed. That this fact is becoming more generally realized is implied by the heartening evidence presented in the body of this publication that reporting is becoming more complete. To those who are helping by such reporting to provide more effective tools for health, thanks are due from all who may thereby be spared illness and untimely death.

F. T. Matheur G. F. Mathews, M. D. Commissioner of Health

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PUBLIC HEALTH STATISTICS OF OKLAHOMA

REPORTABLE DISEASES

1950

entile Health Statistics, Part I, 1950, is the seventh annual summary of the incidence of reportable diseases in the State of Oklahoma. The discussion covers, by disease, the more important aspects of the year's more bidity experience, making comparisons with data accumulated during previous years and illustrating points of particular interest with tables and charts. Following the discussion are detailed tables of data which show the numbers of reported cases by race, with rates per 10%,00% population, for the State and also numbers of reported cases by age, sex and race and by month of report. Additional tables give the numbers of cases reported for each of the counties and for Oklahoma City and Tulsa. Two tables of information not published in previous bulletins have been included for the first time. One of these is for data classified by race and by urban and rural residence, while the other shows reported cases of malignant neglessme, by dense, while the other shows reported cases of the former table, urban residence is defined as residence in an incorporated area having 2,500 or more population.

Most of the case reports from which the data in this bulletin were obtained originated with physicians in private practice, local health departments, hospitals and clinics who make weekly reports of cases on report cards sent to them for that purpose by the State Department of Health. Additional sources were the State Laboratory, death records listing a reportable disease not previously reported, and interstate reciprocal notifications of disease contracted in Oklahoma but diagnosed or treated elsewhere.

Cases reported among military personnel stationed within the State have been included in tabulations for the State as a whole, but have been omitted from county tables. Cases in the civilian population have been allocated to the county of residence, which has been found to be the best approximation to allocation to the place where the disease was contracted.

The degree to which data published in this builtin picture the true occurrence of reportable illness in the State depends upon the completeness of reporting of diagnosed cases. The most readily available information as to an unreported case comes from a death certificate which lists a reportable disease as a cause of death and it is found that the case was not reported before death. It has been found useful to relate the number of cases for an indication as to the completeness of reporting. For diseases for which the case fatality rate has remained very nearly the same over a period of years, a decreasing proportions cases reported by death certificate would indicate more complete reporting. Table 1 shows the proportions of cases of certain diseases reported by death certificate during the year 1950 and

the corresponding proportions for the two-year period 1946-1947. There seems to be some evidence that reporting during 1950 was more nearly complete than it has been in the past, although it still fell far short of 100 per cent.

Cases of Communicable Diseases Reported by Death Certificate Only, Oklahome, 1946-1947 and 1950

1.0	ځ	733	1	MIGOODING COURT
		2 -	10.0	Typhus iever
100	, μ	, 9 ₈	5.1	Typhoid and paratyphoid fevers
7.0	142	2,030	12.5	Tuberculosis, all forms
1.3	· Cr	387	7.9	Septic sore throat
0.2		532	0.7	Scarlet fever
10.0	,	10	7.6	Rocky Mountain spotted fever
0.8	4	533	1.2	Poliomyelitis, acute
27.4	636	2,321	44.1	Pneumonia, all forms
7.1	4	56	12.5	Meningitis, meningococcal
0.1	10	11,768	0.2	Influenza
26.9	7	26	40.5	Encephalitis, infectious
9.2	14	152	15.3	Dysentery
2 . 3	w	131	4.9	Diphtheria
Certificate	Certificate	Cases	Certificate	
by Death	by Death	Reported	ted by Death	
Reported	Reported	Number	Cases Repor-	Disease
Per Cent	Cases	Total	Per Cent of	
	1950		1946-1947	

Population figures used in computing rates for this bulletin are the 1950 enumerated populations as released in preliminary and advance reports by the U. S. Bureau of the Census. The distribution of the enumerated non-white population between Negro and Indian groups has been estimated by the Statistics Division of the State Department of Health. Final death figures for the year 1950 were used in computing case fatality rates, expressed as the per cent of cases which resulted in death.

DIPHTHERIA

The 131 cases of <u>diphtheria</u> reported for 1950 gave a morbidity rate of 5,9 cases per 100,000 population which was the same rate as that established for the year 1949 when 132 cases were reported. Nine of these cases resulted in death, making the case fatality rate 6,9 per cent for 1950. This was lower than the five-year average annual case fatality rate of 11.1 shown in Table 2, below.

Table

Reported Cases and Deaths from Diphtheria, by Age Group, Oklahoma, 1950, and Case Fatality Eates, 1945-1949 and 1950

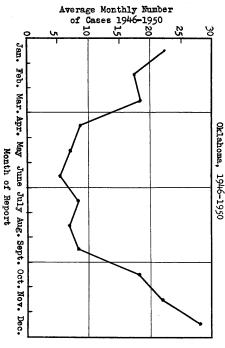
Under 1 year 8.2 1-4 years 15.1 5-9 years 13.4 10 years and over 5.8	Total 11.1	Age Group Oase Fatality
8 4 1 %		
~\$%&v	131	Reported Cases D
11171	9	1950 Case
20.0 14.3 2.8	6.9	Case Fatality Rate

From Table 2, it also may be seen that the highest incidence of diphtheria occurs in the age group one to four years. Furthermore, although the 1950 case fatality rate was higher in infants under one year, the five year case fatality rate also was highest in the one to four years age group.

Like other diseases affecting the respiratory system, diphtheria has a fairly definite pattern of seasonal variation. Chart 1, which shows the average monthly incidence for the five-year period, 1946-1950, reveals that the greatest numbers of cases occur during the winter months.

Chart 1

Cases of Diphtheria by Month of Report,



INTESTINAL DISEASES

There were 152 cases of <u>dysentery</u> reported in 1950. Amebic dysentery was diagnosed in 40 cases, bacillary dysentery in 26 cases and unspecified dysentery in 86 cases. The unusually high incidence rate among indians, 91.9 cases per 100,000 estimated population, may be attributed to an outbreak in Oaster County in the Indian population. This outbreak was incompletely reported and the source not determined because of the lapse of time between the onset of the epidemic and the notification to the health department. The rates for white and Negro groups were 3.9 (80 cases) and 4.4 (6 cases), respectively.

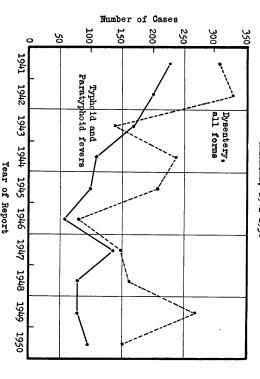
McIntosh, Custer and Pushmataha counties had the highest incidence with 16 cases for McIntosh County and 12 each for the other counties.

Typhoid fever in 1950 showed a slight increase with 84 cases as compared with 74 reported in 1949. Only one case was fatal. The number of cases occurring in the white population was 67, Negro, 5 and Indian, 6.

Chart 2 compares the ten-year incidence of typhoid and paratyphoid fevers and of dysentery, 1941-1950.

Chart 2

Reported Cases of Typhoid and Paratyphoid Fevers and Dysentery,
Oklahoma, 1941-1950



There were 71 cases of <u>food poisoning</u> reported; 66 of these were unspecified as to type and five were reported as due to Salmonella infection. Ten cases were fatal.

Other enteric diseases reported were 14 cases of <u>paratyphoid fever</u> and 11 cases of <u>infectious diarrhea of the newborn</u>.

MALARIA

There were 91 cases of malaria reported as acquired in the United States in 1950, compared with 86 in 1949. In the breakdown by race, Indians predominated with 57 cases giving a rate of 90.3 per 100,000 estimated population. The rates for white and Negro populations were far lower with rates of 1.5 (30 cases) and 2.2 (3 cases), respectively. Only two cases were fatal.

McIntosh County reported melaria most frequently; over one-half, 50 cases, of the 91 cases resided in this county. Pushmataha County had 8 cases, Hughes County had 6, and the remainder of the cases were scattered in seventeen other counties in the State.

Almost one-fourth of the cases occurred in July, with more than two-thirds of the cases occurring July through October.

More of the cases resided in urban areas than in rural areas. There were 59 cases with urban residence, giving a rate of 5.3 as compared with 32 cases having rural residence, a rate of 2.8 cases per 100,000 estimated rural population.

Not included in the above number of cases were two cases reported as acquired outside of the United States.

MEASLES

The year 1950 was a low point in the cycle of incidence for measles. There were 648 cases and only one death reported compared with 7,598 cases and 30 deaths in 1949.

Over 85 per cent of the cases with age specified were under ten years of age.

December was the month of highest incidence with 185 cases reported and May was next to the highest with 110 cases reported.

In all racial groups, the number of males having the disease outnumbered the females.

MENINGOCOCCAL MENINGITIS

The 56 cases classified as meningococcal meningitis in 1950 include one case in which meningitis was unspecified as to type. When case reports of meningitis unspecified as to type were received, a query was sent to the reporting physician for information as to the causative organism. Thirteen such reports were queried. Twelve replies were received which reported six cases to be meningococcal meningitis and six to be non-meningococcal meningitis.

The numbers of cases reported for 1950 and 1949 were the same, but in 1950 there were 12 deaths, two more than in 1949, giving a case fatality rate of 21.4 per cent. The average annual case fatality rate for 1945 through 1949 was 19.5 per cent as shown in Table 3, below. The case fatality rate for the 10-19 year age group was lower than for any other group. Of the 56 cases reported in 1950, 87.5 per cent were under 20 years of age.

Table

Reported Cases and Deaths from Meningococcal Meningitis, by Age Groups, Oklahoma, 1950 and Case Fatality Rates 1945-1949 and 1950

	1945-1949		1950	
Age Group	Case Fatality Rate	Reported Cases	Deaths	Case Fatality Rate
Total	19•5	56	12	21.4
Under 1 year 1-4 years 5-9 years	17.1 22.0 21.3	115 453	F 0.1	33.3 40.0
10-19 years 10-19 years 20-29 years 30 years and over	21.4 25.0 30.9	7 - 7	H11#	28.6

PNEUMONIA AND INFLUENZA

The number of cases of <u>pneumonia</u> reported in 1950 was the highest in five years - 2,321 cases. Indians had the highest incidence rate, 310.5 cases per 100,000 estimated population, compared with 84.9 and 199.8 for the white and Negroes, respectively.

Of the reported cases with type specified, 554 (39.2 per cent) were diagnosed as bronchopneumonia, 446 (31.5 per cent) as primary atypical (virus) pneumonia and 415 (29.3 per cent) as lobar pneumonia. There were 906 cases unspecified as to type.

Case fatality rates for the above three types of pneumonia were 31.0, 16.1 and 41.4 per cent, respectively. The case fatality rate for unspectified types of pneumonia was 20.3. Pneumonia case fatality rates, as such, are difficult to interpret because the number of unreported cases is large. A comparison of the rates for the various types, however, may be used as an indication of the comparative severity of each type of pneumonia, assuming that each is equally well reported.

Aside from Oklahoma and Tulsa counties, Osage County had the largest number of resident cases of bronchial and lobar pneumonia.

A graph of the percentage distribution by age of the three types of pneumonia showed the largest number of cases of the disease to be under one year of age for all types though bronchopneumonia showed the largest percentage at this age. See Chart 3.

Chart 3

Percentage Distribution by Age of Reported Cases of Pneumonia by Type of Infection, Oklahoma, 1950

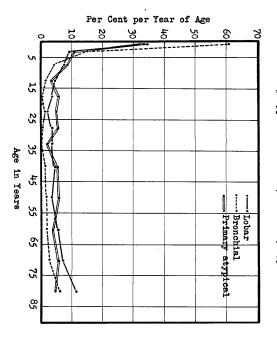


Table μ_{\bullet} below, shows pneumonia by type of infection, by urban and rural residence. Bronchial and primary atypical (virus) pneumonia seemed to have a higher urban incidence than lobar and unspecified pneumonia. For all forms, there were only 90 more rural cases than urban cases.

Table 4

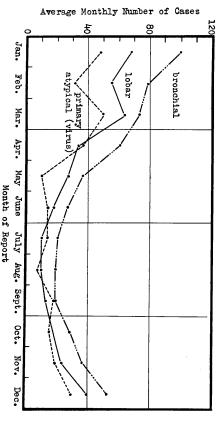
Reported Cases of Pneumonia, by Type, by Urban and Rural Residence, Number and Eate, Oklahoma, 1950

Bronchial Lobar Primary atypical (virus) Unspecified	All forms	Types of Pneumonia
554 415 441 898	2,308	Total Civilian
291 182 239 397	1,109	Urban Number
26.3 16.5 21.6 35.9	100.3	Rate
263 233 202 501	661*1	Rura Number
23.3 20.7 17.9 ##.#	106.3	al Rate

Chart μ_{\bullet} below, shows the seasonal incidence of the various forms of pneumonia. Five-year averages are used for all forms except primary atypical pneumonia for which only a two-year average was available.

Chart 4

Reported Cases of Pneumonia, by Type of Infection and Month of Report, 5-year Average, Oklahoma, 1946-1950



The number of <u>influenze</u> cases reported in 1950, 11,768, was almost six times larger than the number reported for 1949, 2,037. Over one-half, 6,046, of these cases occurred in March and 81.2 per cent occurred in February, March and April.

POLIOMYELITIS

The 533 pollowyelitis cases reported in 1950 were less than one-half of the number of cases reported in the epidemic year of 1949. However, the number was higher than the average annual number of cases, 476.8, reported 1945-1949.

Because of the almost daily publicity this disease has received during the poliomyelitis seasons of the last three or four years, it has become perhaps more completely reported than any other disease as far as diagnosed cases are concerned.

Of the 533 cases, 16 were specified as bulbar, 9 as other paralytic, 13 as non-paralytic and 495 were unspecified. None of the cases which were specified as non-paralytic were under 5 years of age.

Table 5, below, shows the case fatality rates, by age group, for the period 1945-1949. This five-year case fatality rate for all ages was 8.1 per cent. The rate for 1950 was slightly less, 7.1 per cent.

Table 5

Reported Cases and Deaths from Poliomyelitis, by Age Group, Oklahoma, 1950 and Case Fatality Rates, 1945-1949 and 1950

A 20 C 2011	1945-1949		1950	
dnora agy	Case Fatality Rate	Reported Cases	Deaths	Case Fatality Rate
Total	8.1	533	38	7.1
Under 1 year 1-4 years	» y 9 7 7 9	166	»Ц 6	6.60
5-9 years 10-14 years 15 years and over	10.9 12.8	128 102 122	10 8	8.29 2.93

The distribution of cases by race was as follows: white, 512; Negro, 10; Indian, 10; unknown, 1. The attack rates, respectively, were 25.2, 7.3, and 15.8 cases per 100,000 population.

More cases were reported in males than in females, 305 and 228 cases, respectively. Also, urban attack rates exceeded rural attack rates. There were 331 cases reported as residing in urban areas and 201 cases in rural areas, with attack rates of 29.9 and 17.8, respectively.

The map on the opposite page shows the incidence rates of poliomyelitis in the counties of the state over a period of the last five years. Noble and Washington counties had the highest average rates during this period and Mayes and Wagoner counties had the lowest rates.

RESPIRATORY STREPTOCOCCAL INFECTIONS

There were 919 cases of respiratory streptococcal infections reported in 1950 of which 532 cases were diagnosed as <u>scarlet fever</u> and 367 cases were diagnosed as <u>scarlet fever</u> and 167 cases of scarlet fever the scarlet fever corresponding five-year average of 227 cases. was lower than the five-year (1945-1949) number of cases of septic sore throat w throat was considerably average of 579 cases, but the as considerably higher than the

had the higher incidence. The percentage of cases dying was greater for septic sore throat than for scarlet fever which caused no deaths in 1950. Six persons, five of them ten years of age and over, died from septic sore throat. It is probable that, for the most part, only the more advanced are more pronounced. disease to appear to be more severe than scarlet fever, symptoms of which cases of septic sore throat were diagnosed and reported thus causing the was highest in infants under ot qu of septic sore throat, 15 years of age, the cases of scarlet fever outnumbered the The average annual but in older age groups, septic sore throat one year of age for both diseases. case fatality rate (1945-1949)

cases

Table 6

Reported Cases and Deaths from Respiratory Streptococcal Infections, Age Group, Oklahoma, 1950 and Case Fatality Rates, 1945-1949 and 1950

å

	1945-1949	1949			1950			
	Case Fatality	tality	Reported	ted			Case Fatality	tality
2	Rate	è	Cases	8	Deaths	h s	Rate	e
dno.ra agu		Septic		Septic		Septid		Septid
	Scarlet Sore	Sore	Scarlet Sore Scarlet Sore Scarlet Sore	Sore	Scarlet	Sore		Sore
	Fever	Throat	Fever Throat Fever Throat Fever Throat Fever	Throat	Fever	Throat	Fever	Throat
Total	0.5	6.8	532	387	1	6	1	1.6
Under 1 vear	2.	50.0	w	w	1	,	1	1
1-4 years	0.6	11.6	160	£	1	μ	1	2.4
5-9 years	0.4	4.5	253	Ę,	,	•	1	,
10 years and over	0.5	6.3	85	214	1	V	,	2.3
Unknown	1	1	31	86	1	1	,	1

that for scarlet fever, with the largest number of cases, 78, reported April compared with 89 cases of scarlet fever reported in February. lowest months of report were October and July, respectively. seasonal for septic sore throat lagged two months behind reported ü

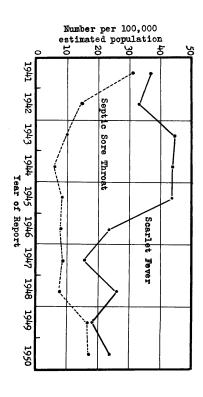
rural, especially scarlet fever with 330 urban cases and only 202 rural cases. This coincides with the fact that over one-third of the scarlet fever cases were residents of Oklahoma The diseases were reported more often in or Tulsa counties, counties with urban residents than in

high urbanization. Slightly less than one-third of the cases of septic sore throat were concentrated in Cleveland, Washington and Osage counties.

The attack rates for the above two diseases for the past ten years are shown in Chart $5 \cdot$

Chart :

Attack Rates from Scarlet Fever and Septic Sore Throat, Oklahoma, 1941-1950



WHOOPING COUGH

Reports of whooping cough cases during 1950 totaled 933 with a rate of 41.8 per 100,000 estimated population. The Indian rate of 88.7 was high in comparison with 36.3 for the white population and 19.6 for the Negroes.

About 20 per cent of the cases with age specified were under one year of age. The case fatality for this group was also high with 9.0 per cent of the 1950 cases dying. Table 7 gives case fatality rates for 1945-1949 and for 1950 by age groups.

Tankha duam Whandan (

Table 7

Reported Cases and Deaths from Whooping Cough, by Age Group, Oklahoma, 1950 and Case Fatality Rates, 1950 and 1945-1949

	1945-1949		1950	
Age Group	Case Fatality Reported	Reported Cases	Deaths	Case Fatality Rate
Total	4.7	933	20	2.1
Under 1 year 1-4 years	2	167 347	, ₄ ,	9.0
5-9 years 10 years and over Unknown	1.3	262 41 116	1 11 1	2.4

Although the number of cases of whooping cough has not shown a definite decrease during the past ten years, the case fatality rate does appear to have become lower as demonstrated by the two five-year averages, 1940-1944, and 1945-1949. In the first period the average case fatality rate was 9.4 per cent and in the second period it was 4.7 per cent. This difference was significant, statistically.

The two summer months of June and July had the largest number of cases reported, 295 or 31.6 per cent of the year's total.

OTHER ACUTE COMMUNICABLE DISEASES

There were 10 cases of Rocky Mountain spotted fever reported in nine scattered counties in the State. This was less then one-half of the 25 cases reported in 1949.

Carter County reported three cases of smallpox and Custer and Pushmataha counties one each. The five cases were between the ages of 15 and 29 years.

The 95 cases of <u>undulant fever</u> reported were lower in number than in 1949 when 144 cases were reported. All but one of the cases were over ten years of age, 55 per cent of the cases with age specified occurring in the 35-54 year age group. Klowa County again reported the largest number of cases; however, these ten cases represented a considerable drop from the 28 reported in 1949.

There were five cases of <u>coccidioidosis</u> in the State, two each residing in McGurtain and Pontotoc counties and one in Oklahoma County. Canadian and Tulsa counties each reported one case of <u>infectious hepatitis</u>.

Other diseases reported were <u>infectious monomucleosis</u>, 10 cases; pellagra, 13 cases; and ringworm of the scalp, 44 cases.

MALIGNANT NEOPLASMS

1950 was the third complete year of report of <u>cancer</u> which was made reportable August 15, 1947, on a special cancer report form. The number of cases reported for the year, 1,649, was only slightly less than the 1,706 cases reported for 1949.

The most common primary site reported was the skin (except vulva, scrotum and anus), 21.6 per cent of all cases. Other primary sites most often reported were the digestive organs and peritoneum, 15.9 per cent; the uterus, 14.7 per cent; and the breast, 9.9 per cent.

Of the 1,649 reports, 357 or 21.6 per cent reported metastasis of the neoplasm to other parts of the body; 462 or 28.0 per cent reported no metastasis and 830 or 50.3 per cent either did not specify or stated that metastasis was unknown. A breakdown by primary site of the 357 cases which metastasis had occurred, certain parts of the respiratory system showed the highest percentage of metastasis, 83.9 per cent. These excluded the nose, rasal carvitles, middle ear and accessory sinuses, which showed smuch lower metastasis rate, 5.7 per cent. Female genital organs, other than the uterus, were naxt with 82.4 per cent; the breast, 79.0 per cent; and urinary organs, 70.6 per cent. These smallest per cents of metastases were cent, and from the skin, 10.6 per cent of the number of neoplasms of each site for which metastasis was specified. Although the percentage of reports specifying whether metastasis occurred was 63 per cent, this item still was not sufficiently reported to be of value for strict interpretation.

Biopsy information was furnished on 1,222 of the 1,649 reports of malignant neoplasm. Of the mumber furnishing this information, 936 or 76.6 per cent specified that a biopsy was performed. When only the reports for which biopsy information was given were considered, it was found that 100.0 per cent of the lympho and reticulosarcomas and of the meoplasms of the brain were biopsied, 89.8 per cent of the neoplasms of the utirus, and 89.3 per cent of the utirus, and

For the white racial group, 1,486 cases were reported, a rate of 73-1 cases per 100,000 estimated population. The Negro incidence of 102 cases (rate 74-1) was approximately the same but the Indian attack rate was apparently much lower. Only 11 cases were reported during the year giving an attack rate of 17-4. The most frequent site reported for the Negro group was the genital organs, male and female, differing from that of the skin for the white group. Although there were more malignancies reported for the white male group than the female, this was reversed in the Negro and Indian groups. See Table VII in the appendix.

The total number of malignant neoplasms in males was slightly higher than that in females, 834 and 815 cases, respectively. The largest deviation between the sexes for common anatomical sites was observed in neoplasms of the buccal cavity and pharynx of which 77.4 per cent were in males. The skin was the most common site in males, whereas the uterus and other female genital organs were the most often reported for females.

When this disease was tabulated by age groups, it was found that the 65-74 year age group had the largest number of cases. Chart 6 and Table 8, below, show the age-specific rates for 1949-1950 for four leading primary sites. Most rates increased with each increase in age, though cancer of the uterus declined after 75 years of age. The skin, the leading site for cancer, showed a graph picture similar to that for the digestive organs and peritoneum, but was excluded from the chart, below, because the excessive rates of 101.2 and 198.9 for the age group, 65-74 years and 75 years and over, respectively, were inconvenient for graphing with the other sites.

hart 6

Age-Specific Rates of Malignant Neoplasms, by Certain Primary Sites and Age Groups, Oklahoma, 1949-1950

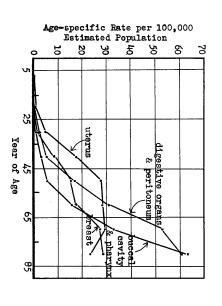


Table 8

Average Annual Age-Specific Attack Rates for Malignant Neoplasms, by Certain Frimary Sites, Oklahoma, 1949-1950

		Pr	Primary Site		
Age Groups	Skin	Uterus	Breast	Dig. Orgs. & Periton.	Buccal Cav. and Pharynx
All Ages	19.2	11.1	7.1	10.4	6.1
Under 14 years	0.4	•	•	0 .1	,
15-24 years	0.9	0.6	0.4	o.3	0.1
25-34 years	ω L	4.8	2.0	2.6	0.9
35-44 years	6.9	17.2	8.6	5.1	3.1 1.
45-54 years	17.7	27.5	15.5	16.5	5.5
55-64 years	49.2	28.1	17.0	30.5	15.4
65-74 years	101.2	29.0	27.2	52.6	32.5
75 years and over	198.9	23.1	28.7	61.1	62.9

Cancer Cases Reported by Death Certificate Only

An accumulative case file was set up August 15, 1947, when physicians, hospitals, clinics and local health departments were asked to list all known existing cases of cancer. All new cases reported since then have been first checked with this file so that duplicates might be eliminated. In 1950, there were 2,172 cases of cencer reported for the first time by death certificate. Since the date of onset of these cases was unknown, they were not included with the cancer morbidity for the year. Table 9, below, shows the number and per cent of cases reported through regular channels and by death certificate only, by the primary site of the malignancy. It may be seen that the primary site most often reported differs between the two groups of cases. Where the skin was the most common site of cases reported through regular channels, the ligestive organs and peritoneum were reported most often by death certificate.

Table 9

Cases of Cancer Reported Through Regular Channels and by Death Certificate Only, Number and Per Cent, by Primary Site of Lesion, Oklahoma, 1950

Primary Site	Cases Reported Through Regular Channels	Cases Reported brough Regular Channels	Cases Reported by Death Certificate Only	orted by tificate y
	Number	Per Cent	Mumber	Per Cent
Total	1,649	99.9	2,172	1.001
Hodgkin¹a Disease	œ	0.5	22	1.0
Buccal cavity and pharynx	133	8.1	51	2.3
Digestive organs and per1-				
toneum	263	15.9	755	8.46
Respiratory system	136	8.2	91	4.2
Uterus	243	14.7	155	7.1
Other female genital organs	ઝુ	2.3	56	2.6
Breast	164	9.9	132	6.1
Male genital organs	52	y•2	179	8.2
Urinary organs	43	2.6	88	4.1
Skin (except vulva, scrotum,			•	
and anus)	357	21.6	₹	2.1
central nervous system	19	1.2	₹	2
Other and unspecified organs	167	10.1	450	20.7
Leukemia	26	1.6	99	4.6

The most common primary sites for the males were the stomach, 183 cases, and the prostate, 147 cases. For the females, the breast with 123 cases and the large intestine with 110 cases were the primary sites most often reported by death certificates.

Of the 2,172 cases, 2,015 were white, 110 were Negro, 43 were Indian and 4 were of unspecified race. The rates per 100,000 estimated population were 99.1, 79.9 and 68.1, respectively.

TUBERCULOSIS

During 1950, 2,030 new cases of <u>tubercullosis</u> were reported in Oklahoma. This was the smallest number, as may be seen in Table I, since the beginning of intensive case-finding in 1945. The attack rate was 90.9 per 100,000 estimated population. As is usually the case, the rate was higher in the non-white than in the white population group; the white rate was 84.0, as compared to 106.8 for the Negro population, and 247.1 for the Indian racial group.

Table 10, below, shows the number of reported cases of tuberculosis, by stage and activity for respiratory tuberculosis, and by site for non-respiratory infections, together with the distribution of each type by race. Only 37 cases of non-respiratory tuberculosis were reported during the year. Thirteen of these cases were of the meninges and central nervous system, and twelve of the disseminated miliary type. Twelve cases of non-respiratory tuberculosis were reported in persons less than 15 years of age, of which infections eight were of the meninges or central nervous system.

Table 10

Reported Cases of Tuberculosis, by Type, Stage and Activity, by Race, Oklahoma, 1950

Tu F	
Munimal, active Minimal, active Moderately advanced, active Far advanced, active Far advanced, active Arrested (including inactive) Apparently cured (any stage) Unqualified Tuberculosis of other sites: Meninges and central nervous system Intestines, peritoneum, mesentery Vertebral column Other bones and joints Skin Lymphatic system Genito-uninary system Other organs Miliary (disseminated)	Type, Stage and Activity
1,993 2,49 333 333 331 3724 11 374 12 2 2 2 2 12 3 3 11 374	T. 4-
1,993 1,679 2,43 2,70 333 2,70 318 6,79 7,74 6,79 1 1 1 3,74 2,89 1,37 100 2 1 1 3 3 3 3 3 3 2 2 1 1 2 2 2 2 2 1 1 2 9	
144 17 21 21 21 21 21 21 21 21 21 21 21 21 21	Race
1,993 1,679 144 150 20 243 202 17 22 2 333 270 21 38 40 318 238 36 40 4 724 679 21 19 5 17 21 38 4 724 679 21 19 5 19 1	
11111111111111111111111111111111111111	Op-

More detailed data about the age at the time of report are included in Table 11, below, for cases of respiratory theorem. So which information was available as to race, sex, and age. Excluded from this table are 79 cases for which one or more of these items of information were not available. It will be seen that 33 cases were reported at ages under 15, which was slightly less than three times the number reported at these young ages for non-respiratory sites, despite the fact that the total number of respiratory cases was more than 50 times the non-respiratory number.

Table 11

Reported Cases of Respiratory Tuberculosis, by Age, Race and Sex and Age-Specific Rates by Age, Oklahoma, 1950

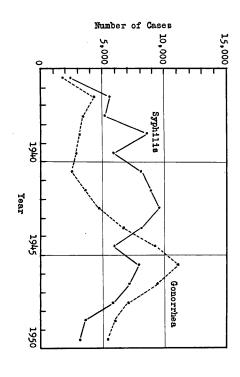
		Age-Specific	4W	White	Non-	Non-White
Age Groups	Total	Rates	Male	Female	Male	Female
Total with age, sex and race specified	1,914	:	9444	682	14th T	<i>††</i> †T
Under 15 years	y y y y	6± 5 2	9 ~	14	≥ +	10
25-34 years	280	87.1	101	122	23	4
35-44 years	<u>.</u>	110.4	365	120	<u>بر</u>	22
45-54 years 55-64 years	3134 4 4 7 4	136.0	181	107 99	1 29	17 10
65-74 years	276	197.3	164	8;	19	7
75 years and over	125	231•3	82	37	, 	w

The death rate from tuberculosis in 1950 was the lowest ever reported in Oklahome, 22,4 per 100,000 estimated population, based on the 500 deaths assigned to this cause. Corresponding rates for 1949 and 1948 were 23.6 and 27.6, respectively.

VENEREAL DISEASES

The downward trend in the yearly number of reported cases of syphilis, which began in 1947, continued in 1950, with 3,169 cases, as compared with 3,657 in 1949. The number of reported cases of <u>gonorrhea</u> showed a slightly larger decline, with 5,309 cases in 1950, compared with 5,987 in 1949. The number of reported cases for each year from 1936 through 1950 is shown on Chart 7.

Ohert 7
Reported Cases of Syphilis and Gonorrhea,
Oklahoma, 1936-1950



The racial distribution of the two diseases was quite different, as shown by Table II, in the appendix. About 56 per cent of the reported cases of syphilis were in the white group, 33 per cent in the Negro group, and 10 per cent in the Indian population, whereas 36 per cent of those having gonorrhes were white, 58 per cent Negro, and 5 per cent Indian. Table 12, below, shows the occurrence, by sex, of each venereal disease, syphilis being broken down by type or stage.

More cases of each of the diseases were reported in males than in females, except for syphilis and granuloma inguinale (only eight cases of the latter having been reported). The excess in syphilis cases in females was in the early latent and congenital categories.

<u>Table 12</u>

Reported Cases of Venereal Diseases,
by Disease, Stage and Sex, 1950

Table 13 includes a breakdown by age of cases of syphilis for which stage was specified together with the rates per 100,000 population in each age group. The largest number of cases of primary and secondary and early latent syphilis were in the age group 15-24 years; on the other hand, more than one-half of the cases of late and late latent syphilis were in persons 45 years of age or older, a group which comprises approximately 28 per cent of the total population.

Reported Cases of Syphilis by Certain Specified Stages, by Age Group, Oklahoma, 1950

Table 13

	Prima. Seco	Primary and Secondary	Early Latent	atent	Late and Late Latent	and
Age Group	Number	Age- Specific Rates	Number	Age- Specific Rates	Number	Age- Specific Rates
Total cases with age specified	360	:	489	•	1,738	
Under 15 years 15-24 years 25-34 years	172 120	49.83 37.33	267 221	1.4 77.3 68.7	81 275	85.5
95-44 years 45 years and over	8¥	11.2 4.2	11 7	38.7 11.2	482 897	끉

Deaths occurring during the year from venereal diseases included 108 from syphilis and one from gonorrhea (a chronic gonococcal infection in a female). Of the deaths assigned to syphilis, 42 were due to sortic aneurysm, and 25 to other cardiovascular syphilis.

RHEUMATIC FEVER

Dysentery
Encephalitis, infectious
Generates
Influenza

308 14 2,551 14,327

13.3

14.2 0.3 156.7 160.0

139 4,694 6,841

6.0 0.3 203.8 297.1

10.6 1.0 287.7 513.7

211 8 9,216 6,924

303.4

821 334 242 26, 596 11,778

1,029 399 3,626 3,701

239

35.8

29.9 Rate

Malaria acquired in U. S. Measles Meningitis, meningococcal Mumps Pneumonia, all forms Poliomyelitis, acute

1,083 2,703 58 2,028 2,429 29

116.3 2.5 87.3 104.5 1.2

1,490 1,589 28

68.7

1,4651 594 1,421 2,376 124

28.3 62.8 25.8 61.7 103.2 5.4

2,346 54 54

20.1 102.3 2.4 61.4 188.3 5.1

759 1,958 200

85.3 95.8 85.8 85.8

1,516 6,331 39

65•5 273•7 1•7

1,408 4,316 117

1,101 841 841

1950 was the second year of report of rheumatic fever with 73 cases recorded, giving a rate of 3.3 per 100,000 estimated population. In 1949 104 cases were reported, a rate of 4.6.

The disease was reported to have occurred more frequently among Negroes and Indians than in the white population, the rates being 5.1 (7 cases), 4.8 (3 cases) and 2.6 (60 cases), respectively.

In a breakdown by age, it may be seen that the largest number of cases, 18, occurred in the 10-14 year age group, whereas there were only two cases under 5 years of age.

Tebruary and March were the high months of report with 22 or 28.8

Typhoid, paratyphoid fevers
Typhus fever
Undulant fever
Whooping cough

Smallpox
Syphilie
Tuberculosis, all forms
Tularemia

43 8,132 1,538 51

350.0 66.2 2.2 9.8 0.1 51.9

200 200 200 200 475

385.3 63.2 1.7 0.1 3.0

76.0

7 8,142 2,867 10 109 1 1 50

0.3 355.1 125.1 0.4 4.8 0.0 2.2 18.6

1,003 194 195,978 2,276 2,276 2,276 2,276 2,276

1.1 43.9 8.5 261.9 98.4 1.1 1.6

19 9,511 1,751 33

Rabies in man Rocky Mountain spotted fever Soarlet fever Septic sore throat

2 859 716

37.0

¥2722 -

1.0 33.4 14.8

1,030 1,030 222

9.6

1,003 141 3

64.00 64.00

There were 19 deaths from rheumatic fewer in 1950, 26 per cent of the cases reported, compared with 21.2 per cent in 1949. The disease took its greatest toll, however, in the form of chronic rheumatic heart disease of which there were 216 deaths.

cent of the cases.

: , Item not applicable Rate is more than 0 but Number or rate is zero less than 0.05

Symbols Used in Tables

	Disease		
Humber	192	1946 1947	
Rate	\$		
Number Rate	194		
Rate	7		
Number	1948		
Rate	æ		
Humber	1949		
Rate	45		
Mumber	19		
Rate	50		

TABLE I. HEPORTED CLASES OF SELECTED COMMUNICABLE DISEASES, NIMBER AND BAFF, (NUMBER PER 100,000 ESTIMATED POPULATION).

OKLABOMA, 1941-1950

Disease

Rate

Number

Rate 17.2

Rate 36.5

Rate

Humber 30.82

1945

2	1946	\$	1947	45	;;	1948	1949	₹	75	1950
Fragase	Number	Rate	Number	Ente	Number	Rate	Humber	Rate	Number	Rate
Anthrex in men			₩	0				1	,	
Ohickenpox	632	27.8	96.	42.7	1,417	62.7	1.751	78.1	2.512	112.5
Dengue	, '			1	, ,	0	, ;	. ;		,
Diphtheria	222	9.8	209	9.2	165	7.3	132	5.9	131	5.9
Dysentery	8	3.5		6.6	163	7.2	273	12.2	152	
Encephalitis, infectious	122	1.02				4.0	, ,	0.7	26	, -
Influensa	6,585	289.8	25,095	1109.6	3,972	176.4	2,037	90.9	11,768	526.9
Halaria, acquired in U. S.	308	13.6	536	23.7	£01	17.8	.8.	3.8 8	91	
Messles Messles Meningitis, meningeneers	#,387 77	193.1	367	270	1,63	72.5	7,538	36.	£.	200
Hamma .	3	5		3	3	3			,	
Paratyphoid fever	÷ ,	0.2	\$	1.9	٠.٤	0 %	5 707	0.0	2,937	
Pneumonia, all forms Poliomyelitis, acute	1,709 134	75.2 19.1	2,002 59	2.8	369 1,646	73.2	1,851	59.0	2,321 5321	23.9
Habies in man	12	0.1			1			1		
Bocky Hountain spotted fever	. 8		8	1.6	ઝ		. 25	:	10	0
Septic sore throat	180	7.9	353 198	8.8	591 176	7.8	388	17.9 17.3	387 387	23.8 17.3
Smellpox	16	0.7	+	0.2	1	0.0	N	0.1	Ų,	
Syphitis Tuberculosis, all forms	2,664	117.3	2,435	107.7	2,348	104.3	2,402	163.2	2,169 2,030	90.9
Tularemia	86	<u>ي</u> 8	130	5.7	æ	3.7	72	3.2	19	
Typhoid fever	, އ	2.4	.%	4.2	74	3.3	74	ე. ა	œ.	
Undulant fever	% •		8 ₽	3.0 9.2	æ .	ب و 80	¥.	6.0	6 h	0.0
Whooping cough	477	21.1	1,055	5.6	1,084	18.1	228	10.2	93	_

22 -

the state of the s	Appoint consp	Venereal diseases, other	OHIUTANA TOAST	Today on force	The sound	Typhoid fever	Tularemia	Tuberculosis, other	The section of the section	Taberculosis, respiratory	Trachoma	Tetanus	Syphilis	Smallpox	Septio sore throat	Scarlet fever	Rocky Mountain spotted fever	Rabies in man	Poliomyelitis, acute	Fneumonia, unspecified	Pneumonia, primary atypical	Pneumonia, lobar	Pneumonia, bronchial	Paratyphoid fever	Ophthalmia neonatorum	Mumps	Meningitis, meningococcal	Measles	Malaria, acquired outside U. S.	Malaria, acquired in U. S.	Influenza	Hookworm	Gonorrhea	German measles	Encephalitis, infectious	Dysentery unspecified	Dysentery, bacillary	Dysentery, amebic	Diphtheria	Ohickenpox	Anthrax in man	Disease
1	3 5	3 2	30	8,	_	20	p		300	1.993	42	۵.	3,169	٠,	387	532	10		533	906		125	554	¥	u	2,937	56	_		92	11,768	₽	5,309	123	26	8	26	8	131	2,512	,	Total
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TABLE III. REPORTED CASES OF COMMUNICABLE DISEASES, BY MONTHS, OKLAHOMA, 1950

ATTORITA R. ATRACTA	Veneral diseases, other	Undulant fover	Typhuo fever	Typhoid fever	Tularenia	Tuberculosis, other forms	Tuberculosis, respiratory	Trachoma	Tetanus	Syphilis	Smallpox	Septic sore throat	Scarlet fever	Rocky Mountain spotted fever	Rables in man	Poliomyelitis, acute	Pneumonia, unspecified	Pheumonia, primary atypical	Pneumonia, lobar	Pneumonia, bronchial	Paratyphoid fever	Ophthalmia neonatorum	Mumps	Meningitia, meningococcal	Neasles	Malaria acquired outside U.S.	Malaria acquired in U. S.	Todayoru	Conorrhea	German measles	Encephalitis, infectious	Dysentery, unspecified	Dysentery, bacillary	Dysentery, amebic	Diphtheria	Anthrex in men	Estimated population		Disease
9 10	797	95	,	\$	61	37	1,993	Ş	- a	3, 169		787	5	5	,	533	906	15	£15	554	¥	·w	2,937	56	846	60	92	76	, JU	123	28	8	26	£	131	3 -	Mumber	2,233,351	Total
41.8 8.14	ψ.	4	0.0	<u>پ</u>	2.7	:,	39.2	2.4	0.4	141.9		:		3 0	- 1	23.9	40.5	20.0	18.6	24.8	0.6	0.1	131.5	2.5	29.0	0.1	4-1	6.363	5.5	5	1.2	3.9	1.2	1.8	5.9	119.5	Rate	,351	el.
736	2	3 8		67	22		1,679	ì		1.76	,	, ,	200	ć		512	123	371	306	428			1,649	50	569	2,	30	4.124	1,720	. 112	22	25	18	37	105	1 26 .	Mumber	2,032,555	White
36.3	30	4.2	0.0	ų.	:	1.4	82.5	9.0	0 0	9.7	2			,	- 1	25.2	0.0	18.3	15.1	21.1	0.6					0.1	1.5	202.9	۰ ¥ د د	20	1.1	1.2	0.9	1.8	5.2	61.1	Rate	.555	te
27	. 2	` N		5	·	w	144	-	٠	1,040	2			٠,	,	10	2	22	5	62		w	47	6	14		اد	265	Confe	202	·w	4	,_	ب	ፈ ነ	₽,	Number	137,671	Negro
19.6			. ,	3.5	2,2	2.2	104.5	0		0.60	2.0.0		, ,	,	,	7.3	50.0	16.0	6.0	45.0	. ,	2.2	34.1	4.4	10.2	,	20,	192.5	***KC33		20	2.9	0.7	0.7	10.9	24.9	Rate	571	8
56	- 0	, ₋		۰	. 1	6	150		۰.	, de	3.	1	-		. ,	Б	. 9	7	. 5	55	,	,	21	1	21	. :	57	\$	290	3	, ,	50	7	,	œ\	2 I	Humber	63,125	Indian
88.7	4.0			9.5		9.5	237.5	55.4		104.5	0.	24.22	34			15.8	150.0	11.1	55.4	87.1		,	33.3	,	y3.3	,	90.3	1018.6	#*6C#	4	1.6	79.2	11.1	1.6	12.7	5 1	Rate	25	B
112		o	.,	٥	ω,		20		,	¥	<u> </u>	V		5 1		-	105	5	. 19	. 9	-		1,220		#	,	,	6.736				7	,	,	١,	1 100 -	Rumber		Unknown

				į			
PRIMARY SITE	TOTAL T	XXX	Î			RACE	
	10181	MALE	FEMALE	WHITE	NEGRO	INDIAN	UNKNOWN
Total, all sites	1,649	834	818	1,486	102	щ	50
Buccal cawity and pharynx	133	103	ઝ	126	w	N	20
Digestive organs	263	176	87	²²	22	ı	7
Respiratory system	136	104	32	126	٠,	N	۰
Bresst	164	8	162	136	19	,	٠
Uterus	243		243	208	21	N	12
Other female genital organs	8	S 1,	%	4	سا	,	_
Urinary organs	\$×	8%	¥,	88	16	1 10	ţμ
Skin, except vulva, scrotum, anus	357	234	123	350	۲	23	+
Brain and central nervous system	15	3 13	17	18	\ 1	1	۱ ،
Lymphosarcome and reticulosarcome	77 %	ដ	₽ 5	೯೪	۰ م		1 +
Hodgkin's disease	8	N	6	œ			
Leukemia	26	19	7	24	10	,	
tissues	N	22		10			
Other and unspecified sites	116	\$	52	102	8	•	6

-					
TABLE V. REPOR	dathrax is man Chickenpox Diplotheria in Emphateria Dysentery, emblid Dysentery, baciliary Dysentery, baciliary Dysentery, baciliary Dysentery, baciliary Dysentery, baciliary Dysentery, bacopialitis, infectious General measure in Sacopialitis, acquired in U. S. Malartia, acquired in U. S. Malartia, acquired in U. S. Malartia, acquired in Heanles (Malartia, acquired in Heanles (Malartia) Backer fewer Senialis (Malartia) Backer		Estimated population, 4-1-50		
TED CASES O	233331 1 5 1 1 5 1 1 1 5 1 1 1 1 1 1 1 1	NO.		OIVILIAN	TOTAL
OITWH &		NO.	1,10	20	
NANT NE	#774999477799989989989999999999999999999	RATE	5,732	TAI	
OPLASHS	7 24 25 25 25 25 25 25 25 25 25 25 25 25 25	NO.	STIRA		URBAN
, by pr 950	218010000000000000000000000000000000000	NO.	MEGRO	PAC.	54
IMARY S	8	NO.	TRIDIAN	38	
IN OF	1,110	NO.	UNEXIONX		
IES I ON	501 1 20 1 20 1 20 1 20 1 20 1 20 1 20 1	No.	1,127	TOT	
RACE	\$6.0 \$6.0 \$7.0	RATE	L.	Ą	
AND SEX	1,78	ю.	STIRM		RURAL
	100113011301100110010011001001100110011	No.	неско	RAC	Į.
	100 100 100 100 100 100 100 100	NO.	KAIGNI	8	
	2. 3.1.0.00.00.00.00.00.00.00.00.00.00.00.00	No.	NENOWN		
	PARIE V. REPURCED CLERK OF HALIOMAR RECULASES, BY FRIMARY SITE OF LESION, RACE AND SEX, OKLHOMA, 1950	manh 2, 1,12 2,096 189.6 92.3 28 1,119 145 25.5 31.8 10 10 111111111111111111111111111111	MADE MADE NO.	Population, h-l-90 1,105,792 WHIE MEDINO INDIAN INDIAN MAINS M	### CONTILLAM ##

TABLE IV. REPORTED CIVILIAN CASES OF COMMUNICABLE DISSASES, NUMBER AND DATE (NUMBER PER 100,000 ESTIMATED POPULATION),
AND NUMBER ET RACE, ET CHEMP AND NUMLI RESIDENCE, CELABOMA, 1959

PARIS II. REPORTED CASES OF COMMUNICARIE DISEASES, NUMBER AND MATE (NUMBER PER 100,000 ESTIMATED POPULATION), BY RACE, ONLARCA, 1950

- 25 -

*Sum of incorporated places in the State having a population of 2,500 or more in the 1950 cansus. Eroken Arrow, Checotah, Dewey, Lindawy, Hichols Hills and Walters were included as urban during the last five months only of 1950.

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		TOTAL			WHITE			NEGRO		I	NDIAN		τ	INKNOWN	
DISEASE	Male	Female	Unknown	Male	Female	Unknown	Male	Female	Unknown	Male	Female	Unknown	Male	Female	Unknown
Anthrax in man Chickenpox Diphtheria Dysentery	600 64 87	608 66 57	1,304 1 8	553 54 53	562 51 24	126 - 3	14 4 5	20 11 1	-	- 22 4 27	15 4 31	ī -	11 2 2	11 1	1,177 1 5
Encephalitis, infectious German measles Gonorrhea Hookworm	14 58 3,439 17	12 55 1,866 14	10 4 13	13 57 1,219 17	9 51 701 14	- 4 - 13	2,097	986 -	=	1 113	- 3 177 -	=	- 10 -	1 2 -	- 6 4 -
Influenza Malaria, acquired in U. S. Malaria, acquired outside U. S. Measles	2,426 43 2 301	2,421 48 246	6,921	1,856 21 2 276	1,866 9 - 229	402 - 64	121 1 - 8	144 2 - 6	=	294 20 11	302 37 - 10	47 - -	155 1 - 6	109 - 1	6,472 - - 37
Meningitis, meningococcal Mumps Ophthalmia neonatorum Paratyphoid fever	34 897 3 11	22 741 3	1,299	30 830 - 10	20 677 - 3	142	24 3 -	2 23 -	-	8 - -	12	1 -	35 1	29	1,156
Pneumonia, all forms Poliomyelitis, acute Rocky Mountain spotted fever Scarlet fever	1,177 305 6 256	978 228 4 259	166 - - 17	963 292 5 251	763 220 4 250	- - - 8	117 6 - 2	103 4 - 3	=	93 7 1 3	103 3 - 3	= =	4 - -	9 1 - 3	166 - - 9
Septic sore throat Smallpox Syphilis Tetanus	148 5 1,536 6	166 1,628 2	73 - 5 -	135 2 914 2	155 - 849 2	18	3 3 471 3	6 - 575 -	=	9 - 126 1	5 - 180 -	=	1 - 25 -	- 24 -	55 - 5 -
Trachome Tuberculosis, respiratory Tuberculosis, other forms Tularemia	35 1,144 12 35	19 847 25 23	2 - 3	10 982 10 16	8 696 18 6	1 -	78 - 3	1 66 3 -	=	25 70 2	10 80 4 -	=	14 16	5 - 17	1 - 3
Typhoid fever Typhus fever Unchilant fever Venereal diseases, other Vincent's angina Whooping cough	41 64 69 61 410	39 1 29 28 27 409	12 114	35 - 59 26 60 359	32 1 27 7 24 371	12 8	2 - 2 /1 - 17	3 - 20 - 10	-	4 1 2 1 31	2 - 1 3 25	-	2 - 3	2 - 2 - 3	2 - 106

TABLE VII. REPORTED CASES OF SELECTED COMMUNICABLE DISPASES BY AGE, OKLAHOMA, 1950

								A	ge in Y	ears							
AII Ages	Under 1 Year	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30–34	35-44	45-54	55-64	65-74	75 and Over	Unknown
2,512 131 152	54 5 19	50 12 18	65 14 8	96 16 4	- 82 7 4	682 36 19	- 67 17 5	12 5 4	- 3 6 5	10 4 3	- 5 3 11	10 2 14	- 1 11	- - 8	1 - 5	- - 3	1,375 3 11
26 123 5,309 44	13 4 -	1 19 7 -	1 10 5	1 9 5 4	- 4 8 1	4 32 12 3	2 13 56 11	6 5 1,223 4	2,073 1	1 1,016 1	6 1 404 1	356 2	71	1 29 -	1 - 9 1	- 1	13 30 15
11,768 91 2 648	82 1 - 42	98 1 - 47	150 4 - 47	109 6 - 51	83 2 - 45	427 8 - 204	269 8 - 45	285 6 - 13	301 2 - 5	297 4 -	276 1 - 2	541 15 - 1	532 12 -	375 7 -	320 7 -	169 5 -	7,454 2 2 145
56 2,937 3 14	3 12 3	7 29 -	2 53 -	3 59 - 2	3 59 -	14 605 -	12 231 -	114 -	77	67 - 2	82 - 2	3 59 - 2	3 18 2	1 4 -	9	1	1,458
2,321 533 10 532	305 15 - 3	126 35 - 19	82 38 - 32	50 49 - 48	46 44 2 61	155 128 2 253	72 102 1 63	59 41 1 6	55 25 -	63 29 1 4	46 13 1 5	144 9 - 2	1/ ₁ 9 5 2 2	156 - -	223	383 - -	207 - - 31
387 5 3,169 8	3 16 -	8 - 3 -	16 - 3 -	6 - 4 1	11 2	43 14 1	32 46 2	37 2 234	34 2 375 1	28 1 313	22 328	30 644 -	12 - 487 2	10 - 327 1	146	3 46	86 181
1,993 37 61	5 2 1	1 2 2	1 4 2	1 1 -	3 1 - 1	17 4 3 1	9 17 2 -	2 74 2 3	1 151 2 1	1 154 2 3	130 1 1	336 1 5	3 337 1 5	7 312 4 5	3 276 4 2	126 5	1 64 3 33
84 1 95 97 100 933	2 - - 1 167	2 - 1 81	3 -	1 - - 3 83	2 - - - 76	18 - 1 - 6 262	12 - 2 1 1 34	7 1 1 20 17 1	7 - 6 39 37 -	2 -6 17 6	2 - 9 5 5 3	9 27 9 1 -	8 - 19 3 - -	1 10 3 -	1 - 4 1 - 2	2 -	7 8 2 22 116
	2,512 131 152 26 123 5,309 44 11,768 91 2 648 56 2,937 3 14 2,321 533 10 532 387 5 3,169 8 1,599	Ages Under 1 Year Y	Ages Under 1 Year 1	Ages Under 1 2 2 2 2 2 131 5 5 12 14 152 19 18 8 26 1 1 1 2 2 2 2 2 1 1	Ages Dnder 1 2 3 2,512 54 50 65 96 131 15 12 14 16 132 19 18 8 4 123 13 19 10 9 5,309 4 7 5 44 - - 4 11,768 82 98 150 109 2 26 27 28 29 20 21 22	Ages Under 1 2 3 4 2,512 54 50 65 96 82 131 15 12 14 16 7 152 19 18 8 4 4 26 1 1 1 1 1,23 13 19 10 9 4 5,309 4 7 5 5 5 44 - - 4 1 11,768 82 98 150 109 83 91 1 1 4 6 2 2 - - - - - 64 42 47 47 51 45 5,66 3 7 2 3 3 3 - - - - 2,321 305 126 82 59 532 3 19 32 48 61 387 3 8 16 6 11 5,3169 16 3 3 4 2 8 - - 1 1 1 3 1,993 5 2 4 - 1 84 2 2 3 1 97 - - - - 100 1 1 - 3 - 100 1 1 1 1 3 1 100 1 1 - 3 - 100 1 1 - 3 - 100 1 1 - 3 - 100 1 1 - 3 -	Ages Duder 1 2 3 4 5-9 2,512 54 50 65 96 82 682 682 131 15 12 14 16 7 36 152 19 18 8 4 4 19 19 19 19 10 19 4 32 5,309 4 7 5 5 8 12 12 14 16 7 36 10 10 10 10 10 10 10 1	Ages Duder 1 2 3 4 5-9 10-14 2,512 54 50 65 96 82 682 67 131 5 12 14 16 7 36 17 152 19 18 8 4 4 19 5 26 1 1 1 1 - 4 2 2 123 13 19 10 9 4 32 13 5,309 4 7 7 5 5 8 12 56 44 4 1 3 11 11,768 82 98 150 109 83 427 269 91 1 1 4 6 2 8 8 2 5 45 204 45 5,66 3 7 2 3 3 14 12 2,731 3 3 2,321 305 126 82 50 46 155 72 2,321 305 126 82 50 46 155 72 3,76 3 19 32 48 61 253 63 387 3 8 16 6 11 43 32 3,76 16 3 3 4 2 14 46 1,993 5 2 4 - 1 1 2 1,993 5 2 4 - 1 1 - 84 2 2 3 1 2 18 15 7 7 7 7 7 7 2,77 10 1 1 1 1 3 17 9 2,77 - - 1 1 1 - 84 2 2 3 1 2 18 12 2,77 10 1 1 1 3 17 9 2,77 - - - 1 1 1 1 3,77 2 2 2 2 1 - 3,76 - - - 1 1 - 84 2 2 3 1 2 18 12 3,77 2 2 3 1 2 18 12 3,77 2 2 3 1 2 18 12 3,77 2 2 3 1 1 1 3 17 9 3,77 2 2 2 2 1 - 3 2 3,77 2 2 3 1 1 1 3 3,77 2 2 2 2 1 - 3 4 1 1 1 1 1 1 1 5 7 7 7 7 7 5 7 7 7 7 7 5 7 7 7 7 7 7 5 7 7 7 7 5 7 7 7 7 5 7 7 7 7 5 7 7 7 7 5 7 7 7 7 5 7 7 7 7 5 7 7 7 7	All Ages Dodder 1 2 3 4 5-9 10-14 15-19	All Ages Dander 1 2 3 4 5-9 10-14 15-19 20-24	Number 1 2 3 4 5-9 10-14 15-19 20-24 25-29	All Ages Duder 1 2 3 4 5-9 10-14 15-19 20-24 25-29 30-34	All Ages Dudder 1 2 3 4 5-9 10-14 15-19 20-24 25-29 30-34 35-44	All Ages Dodder Year 1	All Ages Dinder 1 Year 1	All Ages Duder 1 Year 1	All Ages Dudder 1

TABLE VIII. REPORTED CASES OF COMMUNICABLE DISEASES BY COUNTY OF RESIDENCE, OKLAHOMA CHTY, TULSA CHTY AND HILITARY, 1950

TABLE VIII. REPORTED CASES OF COMMUNICABLE DISEASES BY COUNTY OF RESIDENCE, OKLAHOMA CITY, TUISA CITY AND MILITARY, 1950

Disease	State	Adair	Alfalfa	Atoka	Beaver	Beckhem	Blains	Bryan	Caddo	Canadian
Anthrax in men	,						,			
Chickenpox	2,512	w	۷.	1	ч	10	9	6	£	12
Diphtheria	131	1	,	տ	,	w	, .	10	N	6
Dysentery, amebic	₹		,	,			r	÷		1
Dysentery, bacillary	26		1	1		,	ю		,	-
Dysentery, unspecified	86	,	1	1	,	8	v	μ	_	_
Encephalitis, infectious	26	,			_	,		1	1	1
German measles	123	1	,	1	,	_	1	ı	,	ı
Gonorrhea	5,309	12	ю	4	,	24	ડ	%	71	18
Hookworm	ŧ	ı	,	1	1	,	,	5	, '	,
Influenza	11,768	16	25	ю	v	130	119	95	181	224
Malaria, acquired in U. S.	22		,	,		,		اد	ı	
Malaria, acquired outside U. S.	N			1		,	ı			
Measles	648	1	v	•	,	۷	۲	1	7	10
Meningitis, meningococcal	56	٦	,	w	1	,		,		_
Munps	2,937	4	23	ı	,_	43	29	۲	Ħ	23
Ophthalmia neonatorum	u	,		,	1	,	1	,	,	1
Paratyphoid fever	14	'	1	1	,	,	,	,	ı	
Pneumonia, bronchial	554	Ħ	w	,	1	16	ä	v	21	+
Pneumonia, lobar	415	ω.	,		,	w	5	6	6	w
Pneumonia, primary atypical	446	6	23		•	ሯ	w	8	10	4
Pneumonia, unspecified	906	10	ፘ	10	س	ä	18	10	ŧ	10
Poliomyelitis, acute	533	v	22	w	(A	18	,	น	9	٥.
Rabies in man	1	,	,	,	,		,			
Rocky Mountain spotted fewer	10	,	,		,	ш	,		۲	,
Scarlet fever	532	,	,	,	ı	+	ĭ	+	7	
Septic sore throat	387	,	,	ı	,	19	1	9	_	24
Smallpox	٠,	,		,		1	,	,	•	•
Syphilis	3,169	29	w	17	_	ដ	હ્યુ	14	£	28
Tetanus	- 00	,	,	,	,	1	,	,		1
Trachoma	4	1	,	,		•	_	,	+	_
Tuberculosis, respiratory	1,993	24	w	17	,,	9	8	13	70	ŧ
Tuberculosis, other	37	,,,	,	ч	,	,	•	,	_	
Tularepia	2		1	_	,		1	ı	,	,
Typhoid fever	\$,	13	,	•	_	ı	,	,	N
Typhus fever	,	,	,		,	۲	ı		'	
Undulant fewer	95	,	1	,	۲	2	5	,	,,	8
Venereal diseases, other	97	ı	,	ı	,	,		,	,	_
Vincent's angina	100		1	,	ı	,	_	•	,	
Whooping cough	933	¥	3	w	u _	w	+	2	9	_

Vincent's angina	Venereal diseases, other	Undulant fever	Typhus fever	Typhoid fever	Tularemia	Tuberculosis, other	Tuberculosis, respiratory	Trachoma	Tetanus	Syphilis	Smallpox	Septic sore throat	Scarlet fever	Rocky Mountain spotted fever	Rabies in man	Poliomyelitis, acute	Pneumonia, unspecified	Pneumonia, primary atypical	Pneumonia, lobar	Pneumonia, bronchial	Paratyphoid fever	Ophthalmia neonatorum	Mumps	Meningitis, meningococcal	Measles	Malaria, acquired outside U.S.	Malaria, acquired in U. S.	Influenza	Hookworm	Gonorrhea	German measles	Encephalitis, infectious	Dysentery, unspecified	Dysentery, bacillary	Dysentery, amebic	Diphtheria	Chickenpox	Anthrax in man	Disease
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Halaria, acquired in U. S.
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Passucoria, broadial
Passucoria, broadia
Passucoria, unspectfed
Paltowylitis, acute
Rabies in man
Rabor Houstin spetted fever
spilo nore broad
Rolly Houstin spetted fover
spilo nore broad
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Dysestery, unpeoffed
Occupation, infectious
Occupation, infectious
Convention,
Environment

Disease

Hughes

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Filler.

Klowa

Latimer

Disease	Ouster	Delaware	Dewey	E111s	Garfield	Garvin	Grady	Grant	Greer	Harmon
Anthrex in men		1	١.	-		,	•		•	Ī
Chickenpox	88	1	,,	ı	25	ઝુ	ಶ	7	14	_
Diphtheria	2	,		1	UK T	; ب	'۔	1 -	. !	
Dysentery, amebic			,	ı	11	H	1		1	
Dysentery, bacillary	+	,	ب	ı	L	1	_	1	_	_
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Encephalitis, infectious						N	1		,	_
German measles	w	1	1	,	-	10	10	,		_
Gonorrhea	6	w	5	ı	20	+	67	_		
Hookworm	. '			,			, :		1	_
Influenza	112	79	,	,	202	579	165	2	\$3	170
Malaria, acquired in U. S.	,	1	•	μ		. ;		٠,		,
acquired outsid		1	,	,		,	1	ı	,	
Measles	v	,	6	,	22	20	55	_	+	
Meningitis, meningococcal	_	w	,	1	_	1	اسا	ı	1.	
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Ophthelmia neonatorum		,	1	,	,	1	ı	,	ı i	
Paratyphoid fever	,	,	,	1	N	1	1	,		
Pneumonia, bronchial	ដ	ىب	,	N		+	5	,	u	
Pneumonia, lobar	N	8	_	,	_	۸.	'n			
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Pneumonia, unspecified	14	6	-	w	ا دي	ا م	ادر	_	F	_
Poliomyelitis, acute	N	+	4		7'	۰۰	13	۱ ۸	ν.	
Rabies in men		,	•		1 -		18			
Rocky Mountain spotted fever	,	,	,	,	_	ı		,	•	
Scarlet fever	,	ı	20	+	7	œ	σ	ىد دى	_	
Septic sore throat	w		_		μ.	υ			•	3,
Smallpox	,	1		,	1		,		1	
Syphilis	18	17		w	71	£	£	N	۸.	_
Tetanus		1	1		. 1	• 1	1 1			
Trachoma	13	1	_	1		6	,	,		
Tuberculosis, respiratory	9	Ħ	<u>,</u>	ı	56	50	50		20	
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Tularemia		_	ı	1			_			
Typhoid fever	,	,		,	1	,			1	
Туріма Ґетег		,	1	ı		ı		,	•	
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Venereal diseases, other	ı	,					J.		1 +	
Vincent's angina		1	ı	r	,	-				
Whooping couch	_	N	,	,	20	76	Ħ	ω	-	

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TABLE VIII. REPORTED CASES OF COMMUNICABLE DISEASES BY COUNTY OF RESIDENCE, CHILDRAIN, CHIT, TUESA CITY AND HILITARY, 1950

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Whooping cough	vincent a suging	Venereal diseases, other	Undulant fewer	Typhus fever	Jakar promit.	STORY STORY	The same of the sa	Tuberculosis, other	Inberculosis, respiratory	Trachoma	Tetanus	Syphilis	Smallpox	Septic sore throat	Scarlet fever	Rocky Mountain spotted fever	Rabies in men	Poliomyelitis, soute	Pneumonia, unspecified	Pasumonia, primary atypical	Pneumonia, lobar	Pneumonia, bronchial	Paratyphoid fever	Ophthalmia neonatorum	Mumps	Meningitis, meningococcal	Measles	Malaria, acquired outside U.S.	Malaria, acquired in U. S.	Influensa	Hookworm	Gonorrhea	German measles	Encephalitis, infectious	Dysentery, unspecified	Dysentery, bacillary	Dysentery, amebic	Diphtheria	Chickenpox	Anthrax in man	Disease
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Whooping cough	Vincent's angina	Venereal diseases, other	Churtotte Teast.	Typino rever	The state of the s	Typhoid fever	Tularemia	Tuberculosis, other	inderducers, respiratory	Tradnoma	Tetamus .	arrrade	Silver a pos	Separa entere	CONTRACTOR TOWN	mousy mountain aported rever	Manual III medi	Dobine in man	Doldowing this points	Phoneonia unspecified	rneumonia, roomr		Paratyphoid fever	Ophthalmia neonatorum	Мишре	Meningitis, meningococcal	Measles		Malaria, acquired in U. S.	Inf luenza	Hookworm	Gonorrhea	German measles	Encephalitis, infectious	Dysentery, unspecified	Dysentery, bacillary	Dysentery, smebic	Diphtheria	Chickenpox	Anthrex in men	Диеве
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